

TOWN COUNCIL – AGENDA REQUEST FORM

THIS FORM WILL BECOME PART OF THE BACKGROUND INFORMATION USED BY THE COUNCIL AND PUBLIC

Please submit Agenda Request Form, **including back up information**, <u>8 days prior</u> to the requested meeting date. Public Hearing requests must be submitted <u>20 days prior</u> to requested meeting date to meet publication deadlines (exceptions may be authorized by the Town Manager, Chairman/Vice Chair).

		MEETING	MEETING INFORMATION					
Date Submitted: A Submitted by: Tow Rothhaus and Vice	vn Council Chairm		·					
Department:				uired: 5 minutes				
Speakers:			Backgrous Supplied:	Yes: No: No: No:				
CATEGORY OF BUSINESS (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)								
Appointment:			Recognition/Resignment:	gnation/				
Public Hearing:			Old Business:					
New Business:		\boxtimes	Consent Agenda:					
Nonpublic:			Other:					
		Tanu	E OF ITEM	•				
Committee Appointments								
		DESCRIP	TION OF ITEM					
The Town Council to consider appointing the following individual to a Town Committee, pursuant to Charter Article 4-8: Rodney Buckley - Zoning Board of Adjustment (Alternate to Full member)								
REFERENCE (IF KNOWN)								
RSA:			Warrant Article:					
Charter Article:	4-8	3	Town Meeting:	Meeting:				
Other:			N/A					
EQUIPMENT REQUIRED (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)								
Projector:			Grant Requiremen	nts:				
Easel:			Joint Meeting:					
Special Seating:			Other:					
Laptop:			None:					
CONTACT INFORMATION								
Name:	Finlay Rothhaus		Address	6 Baboosic Lakw Road				
Phone Number			Email Address	frotthaus@merrimacknh.gov				
Approval								
Town Manager:	Yes _⊠_	No:	Chair/Vice Chair:	Yes _ No:				

07/06

Letter of Recommendation

Date:	April 1, 2019							
To:	Merrimack Town Council							
From:	Council Chairman							
Re:	Board, Committee or Commission Appointment							
Applicant's Name: Rodney Buckley		Board, Committee or Commission applied for: Zoning Board of Adjustment		Term of Office Alt to Full				
The following	g individuals conducted an in	terview on th	e above date:					
Town Council	Chairman Signature:		Please ch Recommended	neck (✔)one: Not Recommended				
Fown Council	l Vice Chairman Signature:		Recommended	Not Recommended				
Town Council Signature:	Rep. (Board, Committee, Comm	nission)	Recommended	Not Recommended				
Comments:								
Chairman (Boa	ard, Committee, Commission) Sig	nature:	Recommended	Not Recommended				
#	ised that the above applican	nt has been:	Recommended	Not Recommended				